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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	SH-1
First Named Inventor	Black, Sarah
COMPLETE IF KNOWN	
Application Number	09/901,372
Filing Date	July 9, 2001
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"PHEONOTYPIC CORRELATION PROCESS"

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) **July 9, 2001** as United States Application Number or PCT International

Application Number 09/901,372 and was amended on (MM/DD/YYYY) _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56

I hereby claim foreign or priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(e) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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PTO/SB/02A (11-00)

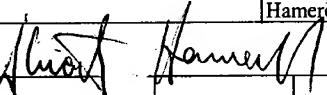
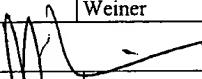
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Stuart	Hameroff		
Inventor's Signature <input checked="" type="checkbox"/>			Date <u>10/19/01</u>
Residence: City Tucson	State AZ	Country US	Citizenship US
Mailing Address <u>2144 E. Damino El-Ganado</u> <u>2509 N Campbell Ave #258</u>			
Mailing Address			
City Tucson	State AZ	ZIP <u>85719</u>	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael	Weiner		
Inventor's Signature <input checked="" type="checkbox"/>			Date <u>10/17/01</u>
Residence: City Webster	State NY	Country US	Citizenship US
Mailing Address <u>93 Summit Drive</u>			
Mailing Address			
City Webster	State NY	ZIP 14580	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

**Assistant Commissioner for Patents
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on 10/11/01

Date


Signature

Howard J. Greenwald

Typed or printed name of person of signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

The following papers listed below are submitted:

Newly executed DECLARATION

Transmittal Form

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Copy of NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

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Attachment to (PTO/SB/21) Transmittal Form (continued)

Remarks:

In partial response to NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION, dated 8/27/2001, applicant, on 10/25/2001, submitted 1) the DECLARATION, newly dated and signed by two inventors, Sarah Black and Michael Weiner; 2) 2 sheets of substitute drawings in compliance with 37 CFR 1.84 and with the identifying indica on the reserve of each drawing, and 3) a check for \$65.00 for the surcharge for late filing of the DECLARATION. This was a partial response to the NOTICE. Now, as a final response to the NOTICE, enclosed and submitted herewith is a newly executed DECLARATION by inventor, Stuart Hameroff. This completes the requirements as set forth in the NOTICE, dated 8/27/2001. Applicant does not believe that any fees are due. However, if additional fees are required, please charge to Deposit Account 50-1706.

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